

# DEPARTMENT OF PUBLIC HEALTH

## Massachusetts Bioterrorism Preparedness Advisory Committee

### National Pharmaceutical Stockpile Workgroup

**September 4, 2002**  
**400 Worcester Road, Framingham**

#### ATTENDEES

Adele	Audet	DPH
Martha	Badger	DPH
Jean	Bennett	Children's Hospital
Janice	Berns	Needham Health Department
Lt. James	Devlin	State Police
Sophia	Dyer	Boston EMS
Sheila	Edwards	MA National Guard
Tina	Ford	MA League of Community Health Centers
MaryShery l	Horine	DPH
Cindy	Larson	DPH
Walt	Lasota	DPH
Donna	Lazorik	DPH
Laurel	Lombardi	Cardinal Health
Shannon	Manzi	Children's Hospital
Dave	Martineau	MEMA
Debbie	McLaughlin	Haverhill Health Department/MAPHN
Maureen	McMahon	Boston Medical Center (COBTH)
Michael	Mozzer	DPH
Mike	Philbin	MEMA
Bill	Ryder	Massachusetts Medical Society
Pejman	Talebian	DPH
Janice	Tellier	Wellesley Health Department
Charles	Young	Division of Professional Licensure

- Introductions
- Minutes of August 6 meeting

<b>Workgroup Communications</b>
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- Advisory Committee homepage

[www.mass.gov/dph/bioterrorism/advisorygrps/index.htm](http://www.mass.gov/dph/bioterrorism/advisorygrps/index.htm)

or

[www.mass.gov/dph](http://www.mass.gov/dph)

- Click on “Emergency Preparedness & Response”
- Click on “Advisory Committees Homepage”
- Email distribution list  
The website will soon have a distribution list for use by members to communicate with others in the group. Individual addresses will not be visible, only the webmaster will have access to the individual addresses. Browsers will only see the list’s name.
- DPH is looking into getting listservs set up as well

<b>Workgroup Mission</b>
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- Subcommittee of Massachusetts Bioterrorism Preparedness Advisory Committee
- Advises the Advisory Committee, the Hospital Preparedness Planning Committee and DPH on implementing NPS-related aspects of the Bioterrorism Preparedness & Response Program (CDC Cooperative Agreement)
- Refine interim state-wide NPS asset management plan
- Develop detailed state-wide NPS asset management plan
- Assist in development of regional and local NPS asset management plans
- Develop regional plans for vaccination of or distribution of antibiotics to entire state population within 3-5 days

The first progress report on these deliverables is due on October 1, 2002.

**Mission Statement (Proposed)**

To advise the DPH on:

- development of detailed state-wide and regional plans to manage distribution and dispensing of NPS assets;
- development of model plans for local and hospital NPS asset management;

- development of operational capability to carryout plans; and
- evaluation and assessment of plans and operations.

Question: What does “regional” mean?

Grant Carrow: The distribution subgroup is addressing this issue.

Please let us know your feedback on the proposed mission statement.

### **Subgroup Reports**

The subgroups met last week to begin development of detailed workplans.

#### **Distribution**

- Getting assets to the location where they are needed

Adele Audet

Jean Bennett

Walter Lasota

Robert Morrison

Pejman Talebian

#### **Dispensing**

- Getting assets to patients

Martha Badger

Janice Berns

Shannon Manzi

Jim Matthews

Pejman Talebian

### **NPS Workplan**

**The subgroups worked on developing the following workplan for NPS planning.**

#### **Components of the NPS Workplan**

- Needs Assessment

- Asset Management Protocols
- Develop Operational Capability (exercises, training, evaluation)

#### **NPS Workplan: Needs Assessment**

- RFQ Criteria
  - Draft should be completed by September 13. This group can help develop criteria related to NPS for the larger RFQ.
- Content
  - Geographical capacities
  - Temporal capacities (immediate/long term needs)
  - Medical capacities

#### **NPS Workplan: Distribution**

- **Asset Management Protocols**
  - Request for assets:
    - State request to CDC (MEMA to handle) and local / regional / hospital requests to state. Need to establish criteria and identify specific needs in an event.
  - Receipt:
    - Need to identify possible locations, air/land transport, transfer of custody. Need to establish criteria for specifying locations in event.
  - Storage:
    - Need to identify initial locations for receipt and establish criteria for specifying location in event. Need to identify regional and local staging areas. Logistical considerations include space, environmental conditions, security.
  - Distribution:
    - Considerations include subdivisions or assets (for example, if assets come in a 12 hour push pack), transportation/delivery, security, transfer of custody, communications.
  - Recovery:
    - How to identify assets that are salvageable, salvaging assets, and return to CDC.

#### **NPS Workplan: Dispensing**

- **Asset Management Protocols**

- Situation Assessment:
  - Patient treatment needs: Modalities, access
  - Supply needs: Pharmaceuticals, medical materiel
  - Personnel needs: Intake, dispensing (prescribing, delivering, administering, followup)
  - Logistical support needs
- Request assets
  - Initiate request
  - Prepare for receipt
- Receive assets
- Dispensing
  - Staff locations
  - Manage patients and staff
  - Track dispensing
  - Followup

#### **NPS Workplan: Develop Operational Capability**

- Distribution-specific
    - Agreements with other states, parties, etc. (cooperative agreements and contracts)
  - Dispensing-specific
    - Volunteer registry
  - Tracking systems
    - Inventory
    - Patients
    - Health workers
  - Training
  - Exercising
  - Evaluation
  - Public education and preparedness
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- Tina Ford will provide a definition of special populations to Grant Carrow
  - Concerns from a local health department: Can you ensure that DPH will pass plans down to the local level? What resources will cities and towns need to have?

Grant Carrow: Local representatives are involved in development of plans and as part of the planning process, model plans will be developed and provided to cities and towns. The needs assessment and planning process will provide information on resources needed. Also, MEMA is the state's coordinating agency and they can coordinate communities' needs in an emergency with the resources that are available statewide.

- MarySheryl Horine: perhaps this group should make a recommendation to the larger Bioterrorism Advisory Committee that a separate work group be formed on Personnel Surge Capacity - look at the different databases that towns and agencies have on the public health workforce.
- Sue Lett: perhaps the group should recommend to the Needs Assessment Workgroup that the RFQ criteria include an analysis of the applicability of the current vaccine distribution system to NPS planning needs.

#### **Workgroup Liaisons**

The following work groups overlap with the NPS work group. Let Grant Carrow know if you want to participate in these other groups as the NPS work group liaison.

- Education & Training
- Epidemiology & Surveillance
- Health Area Network (HAN)
- Needs Assessment
- Risk Communication
- Smallpox Vaccine

#### **Interim Plan Status**

No comments were received from Workgroup members on the interim plan.

#### **CDC/NPS site review**

September 26

They have given us written materials regarding the things they are looking for in the site review.

<b>NPS Coordinators</b>
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These three positions have been established but are not yet posted. They are one statewide coordinator and two regional coordinators to work with the MMRSSs. CDC says we should be dedicating more money to NPS personnel, so we will probably hire another wave of NPS personnel, particularly logistics experts.

<b>Other Business</b>
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There will be a New England regional conference on emergency management in Worcester on Nov. 19-21. Information is available on MEMA's website.

<b>Next Meeting</b>
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The next meeting is Wednesday, October 16, 8:30am at MEMA.